|  | Зe   | st Avai                                   | lable        | CO                   | μy                           |                  | *        | 11                                   |                        |     |                     | _  |
|--|--|---|--------------|----------------------|------------------------------|------------------|----------|--------------------------------------|------------------------|-----|---------------------|--|
|  |  |   |              |                      |                              |                  |          | Application or Docket Number         |                        |     |                     |  |
|  | PATENT A                                       | RD  | 3350-056     |                      |                              |                  |          |                                      |                        |     |                     |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |   |              |                      |                              |                  |          | SMALL ENTITY OTHER THA               |                        |     |                     |  |
| TO   | AL CLAIMS 19                                   |   | Ú,           |                      |                              | RATE             | FEE      |                                      | RATE                   | FEE |                     |  |
| FOI  | 3  | 13/                                       | NUMBER FILED |                      | NUMBE                        | R EXTRA          |          | BASIC FEE                            | 355.00                 | OR  | BASIC FEE           | 710.00   |
| тот  | TAL CHARGEA                                    | L CHARGEABLE CLAIMS /9 minus 20=          |              | us 20=               | . 0                          |                  |          | X\$ 9=                               |                        | OR  | X\$18=              |  |
| IND  | EPENDENT CL                                    | AIMS                                      | 3 minus 3 =  |                      | 0                            |                  | X40=     |                                      |                        | OR  | X80=                |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |              |                      |                              |                  |          | +135=                                |                        | OR  | +270=               |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |              |                      |                              |                  |          | TOTAL                                |                        | OR  | TOTAL               | 710  |
| CLAIMS AS AMENDED - PART II 4 29 (Column 1) (Column 2) (Column 3)        |  |   |              |                      |                              |                  |          | OTHER THAT SMALL ENTITY OR SMALL ENT |                        |     |                     |  |
| NT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVI | IEST<br>(BER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                                 | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE                           |
| <b>AMENDMENT</b>   | Total  | .19                                       | Minus        | 2                    | 0                            | = (+)            | 1 [      | X\$ 9=                               |                        | OR  | X\$18=              |  |
| MEN  | Independent                                    | . 3                                       | Minus        | •••                  | 3                            | -4               | ] [      | X40=                                 |                        | OR  | X80=                |  |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                      |                              |                  |          | +135=                                |                        |     | +270=               |  |
|  |  |   |              |                      |                              |                  | L        | +135=                                |                        | OR  | TOTAL               |  |
|  |  |   |              |                      |                              |                  |          | ODIT. FEE                            |                        | OR  | ADDIT. FEE          | <u> </u>   |
| <u></u>  | فالمدرات فأقام المحار الأشامون                 | (Column 1)                                | 77           |                      | imn 2)<br>HEST               | (Column 3        | <u>,</u> |                                      | Labor                  | •   |                     | 4001   |
| MENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |              | NUI<br>PREV          | MBER<br>TOUSLY<br>O FOR      | PRESENT<br>EXTRA |          | RATE                                 | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE                           |
| O M  | Total  | •   | Minus        | **.                  |                              | = .              | 7 [      | X\$ 9=                               |                        | OR  | X\$18=              |  |
| AMEND  | Independent                                    | • , , , , ( , , , )                       | Minus        | •••                  |                              | =                | ]        | X40=                                 |                        | OR  | X80=                | -  |
| 11   | FIRST PRESE                                    | NTATION OF N                              | IULTIPLE DEI | PENDEN               | IT CLAIM                     |                  | Jŀ       |                                      | -                      | ┧   |                     | <del>                                     </del> |
|  |  |   |              |                      |                              |                  |          | +135=                                |                        | OR  | +270=               |  |
|  |  |   |              |                      |                              |                  |          | TOTAL<br>ADDIT. FEE                  |                        | OR  | TOTAL<br>ADDIT. FEE |  |
|  |  | (Column 1)                                |              | (Coli                | umn 2)                       | (Column 3        |          |                                      |                        | _   | <del>_</del> _      |  |
|  | 17 18 18 18 18 18 18 18 18 18 18 18 18 18      |   | 177          |                      | HEST                         |                  | 7 1      |                                      | ADDI                   | 1   |                     | ADDI-  |

|                  |  | (COlumn 1)                                |       | (Oolulinite)                                | (Ooldinir O)     |  |  |  |  |
|------------------|--|---|-------|---|------------------|--|--|--|--|
| ENTC             |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |  |  |  |  |
| <b>AMENDMENT</b> | Total  | •   | Minus | ••  | =                |  |  |  |  |
|                  | Independent                                    | •   | Minus | ***   | =                |  |  |  |  |
|                  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |  |  |  |  |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

OR

OR

TIONAL

**FEE** 

RATE

X\$ 9=

X40=

+135=

TOTAL ADDIT. FEE

TIONAL

FEE

RATE

X\$18=

X80=

+270=

TOTAL ADDIT. FEE

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Indicated Alimber Previously Paid For "0")

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